

**Office of Administration
Commissioner's Office**

REIMBURSEMENT REQUEST FOR OTHER SERVICES

Program: **Alternatives to Abortion**

Contractor: Alliance for Life

Subcontractor: Options Pregnancy Clinic

Please enter below the information for each item/service to be purchased. List the date of purchase, item to be purchased, cost for the item, and the justification. Items must be approved **before** purchased/provided to be reimbursed.

Client Name [REDACTED] Date Enrolled 4/11/2017

Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
5/12/2017	Car Repairs for [REDACTED] - replace both front left & right ball joints and perform alignment	\$331.00	Client is without transportation and needs the car fixed so she can attend dr. appointments, and get to a place of employment. Client cannot pay for repairs because she has no car to get her to work.
Amt to be reimbursed	\$331.00		

The following items and services are not eligible for reimbursement: taxes, travel expenses, shipping charges, insurance, interest, penalties, termination payments, attorney fees, and liquidated damages. Please subtract these charges from your total reimbursement request prior to submission.

Authorized person requesting purchase: Christina Todd

Alliance for Life Program Manager: Marsha Middleton

Purchase is Approved ☐ Denied ☐ AZA Signature _____ Date _____

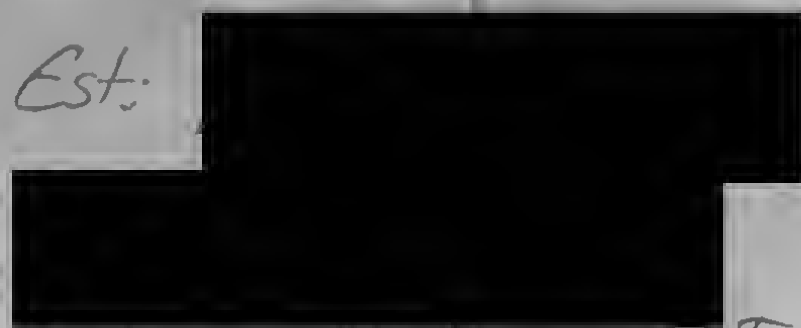
Reason for denying purchase: _____

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Your Business is Appreciated!

Fax: 417-336-4433

Est:



Both front lower B.J's +
Align

PARTS	132.00
LABOR	140.00
ALIGN	59.00
<hr/>	
	331.00 + TAX



1207 W. South St. (Bus. 65 South) • Ozark, MO 65721
Hours: Mon.-Fri. 8:00 - 5:00 Sat. 8:00 - Noon

FAX



192 Expressway Ln
Branson, MO 65616
417.336.5483
info@optionspregnancyclinic.com

TO: Carrie
FROM: Options Pregnancy Clinic /
FAX: 417-336-4433
PHONE: 417-336-5483
SUBJECT: RFO- [REDACTED] DATE: 5/13/17
RE: 5-31-17

Total number of pages: 3